


# FORM LM-2 LABOR ORGANIZATION ANNUAL REPORT

**MUST BE USED BY LABOR ORGANIZATIONS WITH \$200,000 OR MORE IN  
TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS IN TRUSTEESHIP**

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

For Official Use Only 		1. FILE NUMBER 0 6 9 - 2 1 6	2. PERIOD COVERED MO DAY YEAR From 0 1 0 1 2 0 0 0 Through 1 2 3 1 2 0 0 0	3. (a) AMENDED — If this is an amended report correcting a previously filed report, check here: <input type="checkbox"/> (b) TERMINAL — If your organization ceased to exist and this is its terminal report, see Section XII of the instructions and check here: <input type="checkbox"/> (c) SUBSIDIARY — If this is a report for a subsidiary organization of your union as defined in Section X of the instructions, check here: <input type="checkbox"/>
<b>IMPORTANT</b>  Peel off the address label from the back of the package and place it here.  If the label information is correct, leave Items 4 through 8 blank.  If any of the label information is incorrect, complete Items 4 through 8.				8. MAILING ADDRESS (Type or print in capital letters.) First Name M A R Y Last Name H A R R I S P.O. Box • Building and Room Number (if any) S U I T E 3 0 4 Number and Street 5 2 0 N O R T H D E L A W A R E A V E N U E City P H I L A D E L P H I A State ZIP Code + 4 P A 1 9 1 2 3 -
4. AFFILIATION OR ORGANIZATION NAME H E R E I U , A F L - C I O				
5. DESIGNATION (Local, Lodge, etc.) L O C A L		6. DESIGNATION NUMBER 6 3 4		
7. UNIT NAME (if any)				
9. Are your organization's records kept at its mailing address? (If "No," provide address in Item 75.) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				
75. ADDITIONAL INFORMATION (If more space is needed, attach additional pages properly identified.) Item Number 72 THIS ITEM REFLECTS ONLY DISBURSEMENTS ON BEHALF OF INDIVIDUAL MEMBERS FOR OTHER THAN NORMAL OPERATING PURPOSES. ALL OF OUR EXPENSES BENEFIT THE ENTIRE UNION MEMBERSHIP AND INDIVIDUALS ARE NOT NORMALLY SINGLED OUT FOR SPECIAL PURPOSES. VARIOUS S E E A T T A C H E D S C H E D U L E				
Each of the undersigned, duly authorized officers of the above labor organization, declares, under the applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VI on penalties in the instructions.)				
76. SIGNED: <u>Mary Harris</u> 3 1 2 9 1 0 1 (2 1 5) 6 2 9 - 1 1 7 3 Date Telephone Number		77. SIGNED: <u>Sally H. Conley</u> 3 1 2 9 1 0 1 (2 1 5) 6 2 9 - 1 1 7 3 Date Telephone Number		
PRESIDENT (If other title, see instructions.)		TREASURER (If other title, see instructions.)		

*During the Reporting Period Did Your Organization:*

- |  | Yes | No |
|--|-----|----|
| 10. Have a "subsidiary organization" as defined in Section X of the instructions? .....  |     | X  |
| 11. Create or participate in the administration of a trust or other fund or organization, as defined in the instructions, which provides benefits for members or their beneficiaries? .....              | X   |    |
| 12. Have a political action committee (PAC) fund? .....  |     | X  |
| 13. Acquire or dispose of any goods or property in any manner other than by purchase or sale? .....  | X   |    |
| 14. Have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative? .....  |     | X  |
| 15. Discover any loss or shortage of funds or other property? .....<br>(Answer "Yes" even if there has been repayment or recovery.)  |     | X  |
| 16. Have any officer who was paid \$10,000 or more by your organization and also received \$10,000 or more as an officer or employee of another labor organization or of an employee benefit plan? ..... |     | X  |
| 17. Liquidate or reduce any liabilities without disbursement of cash? .....  |     | X  |

(If the answer to any of the above questions is "Yes," provide details in Item 75 on page 1 as explained in the instructions for each item.)

18. How many members did your organization have at the end of the reporting period? 2 0 3 0

19. What is the date of your organization's next regular election of officers? MO YEAR  
0 6 2 0 0 2

20. What is the maximum amount recoverable under your organization's fidelity bond for a loss caused by any officer or employee of your organization? \$ 5 0 0 0 0 0

21. What are your organization's rates of dues and fees?  
(Enter a minimum and maximum if more than one rate applies for any line.)

Rates of Dues and Fees	
(a) Regular Dues/Fees	\$ 10.25-11.65 per B I - W E E K L Y (Month, Year, etc.)
(b) Initiation Fees	\$ NONE
(c) Transfer Fees	\$ NONE
(d) Work Permits	\$ NONE per (Month, Year, etc.)

22. During the reporting period, did your organization have any changes in its constitution and bylaws (other than rates of dues and fees) or in practices/procedures listed in the instructions? .....  
(If the constitution and bylaws have changed, attach two new dated copies. If practices/procedures have changed, see the instructions.)

	Yes	No
		X

23. Were any of your organization's assets pledged as security or encumbered in any other way at the end of the reporting period? ..... X

24. Did your organization have any contingent liabilities at the end of the reporting period? ..... X

(If the answer to Item 23 or 24 is "Yes," provide details in Item 75 on page 1.)

# STATEMENT A — ASSETS AND LIABILITIES

FILE NUMBER: 0 6 9 — 2 1 6

Complete Schedules 1 Through 15 Before Completing Statement A

Enter Amounts in Dollars Only — Do Not Enter Cents

	ASSETS	From SCH #	Start of Reporting Period (A)	End of Reporting Period (B)
			Item	
ASSETS	25. Cash .....	1	1 6 2 9 6 5	6 0 7 2 1
	26. Accounts Receivable .....		2 2 6 5 4	4 0 5 8 1
	27. Loans Receivable .....		1 0 1 9	7 7 5 3
	28. U.S. Treasury Securities .....		0	0
	29. Investments .....	2	0	0
	30. Fixed Assets .....	5	1 4 3 1 5	6 4 8 2
	31. Other Assets .....	3	0	0
	32. TOTAL ASSETS .....		2 0 0 9 5 3	1 1 5 5 3 7
LIABILITIES	33. Accounts Payable .....	8	2 9 5 4 8	1 0 5 2 9
	34. Loans Payable .....		0	0
	35. Mortgages Payable .....		0	0
	36. Other Liabilities .....		0	0
	37. TOTAL LIABILITIES .....		2 9 5 4 8	1 0 5 2 9
	38. NET ASSETS (Item 32 less Item 37) .....		1 7 1 4 0 5	1 0 5 0 0 8

# STATEMENT B — RECEIPTS AND DISBURSEMENTS

FILE NUMBER: 0 6 9 — 2 1 6

Complete Schedules 1 Through 15 Before Completing Statement B

Enter Amounts in Dollars Only — Do Not Enter Cents

CASH RECEIPTS		From SCH #	AMOUNT	CASH DISBURSEMENTS		From SCH #	AMOUNT
Item				Item			
39. Dues .....			2 8 9 2 1 0	56. To Officers .....	9		1 0 7 8 0 8
40. Per Capita Tax .....			0	57. To Employees .....	10		2 5 7 2 2
41. Fees .....			1 2 8 7 2 9	58. Per Capita Tax .....			2 1 9 1 1 0
42. Fines .....			0	59. Fees, Fines, Assessments, etc. ....			0
43. Assessments .....			0	60. Office & Administrative Expense ....	13		1 3 0 3 1 5
44. Work Permits .....			0	61. Educational & Publicity Expense ...			5 4 6
45. Sale of Supplies .....			0	62. Professional Fees .....			1 1 7 9 4
46. Interest .....			1 0 4 9	63. Benefits .....	11		2 1 9 4 8
47. Dividends .....			0	64. Contributions, Gifts & Grants .....	12		2 7 0 4
48. Rents .....			0	65. Supplies for Resale .....			0
49. Sale of Investments & Fixed Assets .....	6		3 8 5 2	66. Direct Taxes .....			1 4 0 3 6
50. Loans Obtained .....	8		0	67. Withholding Taxes .....			4 3 4 8 2
51. Repayments of Loans Made .....	1		1 5 3 6	68. Purchase of Investments & Fixed Assets .....	7		0
52. On Behalf of Affiliates for Transmittal to Them .....			0	69. Loans Made .....	1		8 2 7 0
53. From Members for Disbursement on Their Behalf .....			0	70. Repayment of Loans Obtained .....	8		0
54. Other Receipts .....	14		8 1 1 7 1	71. To Affiliates of Funds Collected on Their Behalf .....			0
				72. On Behalf of Individual Members ...			0
				73. Other Disbursements .....	15		2 2 0 5 6
55. TOTAL RECEIPTS .....			5 0 5 5 4 7	74. TOTAL DISBURSEMENTS .....			6 0 7 7 9 1

If more space is needed to complete Schedules 1 through 8 or 11 through 15, continue on additional pages, using the same column headings used on the schedule, and enter the totals on the line provided for additional pages in each schedule. For Schedules 9 and 10, use the continuation pages provided.

FILE NUMBER: 069-216

Enter Amounts in Dollars Only — Do Not Enter Cents

## SCHEDULE 1 — LOANS RECEIVABLE

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to business enterprises regardless of amount. (A)	Loans Outstanding at Start of Period (B)	Loans Made During Period (C)	Repayments Received During Period		Loans Outstanding at End of Period (E)
			Cash (D)(1)	Other Than Cash (D)(2)	
1. Name: SEE ATTACHED SCHEDULE Purpose: Security: Terms of Repayment:					
2. Name: Purpose: Security: Terms of Repayment:					
3. Name: Purpose: Security: Terms of Repayment:					
4. Totals from additional pages (if any)	1019	8270	1536	0	7753
5. Totals of loans not listed above	0	0	0	0	0
6. Totals of Lines 1 through 5	1019	8270	1536	0	7753
Enter the Totals from Line 6 in ..... <div style="display: flex; justify-content: space-between; width: 100%;"> <span>Item 27 Column (A)</span> <span>Item 69</span> <span>Item 51</span> <span>Item 75 with Explanation</span> <span>Item 27 Column (B)</span> </div>					

## SCHEDULE 2 — INVESTMENTS (OTHER THAN U.S. TREASURY SECURITIES)

Description (A)	Amount (B)
<b>Marketable Securities</b>	
1. Total Cost	0
2. Total Book Value	0
3. List each marketable security which has a book value over \$1,000 and exceeds 20% of Line 2.	
(a) _____	
(b) _____	
(c) _____	
(d) _____	
<b>Other Investments</b>	
4. Total Cost	0
5. Total Book Value	0
6. List each other investment which has a book value over \$1,000 and exceeds 20% of Line 5. Also list each subsidiary for which separate reports are attached.	
(a) _____	
(b) _____	
(c) _____	
(d) _____	
(e) Total from additional pages (if any)	0
7. Total of Lines 2 and 5	0
Enter the Total from Line 7 in ..... Item 29, Column (B)	

## SCHEDULE 3 — OTHER ASSETS

Description (A)	Book Value (B)
1.	
2.	
3.	
4.	
5.	
6. Total from additional pages (if any)	0
7. Total of Lines 1 through 6	0
Enter the Total from Line 7 in ..... Item 31, Column (B)	

## SCHEDULE 4 — OTHER LIABILITIES

Description (A)	Amount at End of Period (B)
1.	
2.	
3.	
4.	
5.	
6. Total from additional pages (if any)	0
7. Total of Lines 1 through 6	0
Enter the Total from Line 7 in ..... Item 36, Column (D)	

# SCHEDULE 5 — FIXED ASSETS

FILE NUMBER: 0 6 9 - 2 1 6

Description (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
1. Land (give location):				
2. Totals from additional pages (if any)	0		0	N/A
3. Buildings (give location):				
4. Totals from additional pages (if any)	0	0	0	N/A
5. Automobiles and Other Vehicles	17021	12120	4901	N/A
6. Office Furniture and Equipment	23514	21933	1581	N/A
7. Other Fixed Assets	0	0	0	N/A
8. Totals of Lines 1 through 7	40535	34053	6482	N/A

Enter the Total from Line 8, Column (D) in ..... Item 30, Column (B)


# SCHEDULE 6 — SALE OF INVESTMENTS AND FIXED ASSETS

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. SEE ATTACHED SCHEDULE				
2.				
3.				
4.				
5. Totals from additional pages (if any)	7055	2146	3852	3852
6. Totals of Lines 1 through 5	7055	2146	3852	3852
			7. Less Reinvestments	0
			8. Net Sales	3852






Enter the Total from Line 8 in ..... Item 49

# **SCHEDULE 7 — PURCHASE OF INVESTMENTS AND FIXED ASSETS**

FILE NUMBER: 0 6 9 — 2 1 6

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1.			
2.			
3.			
4.			
5. Totals from additional pages (if any)	0	0	0
6. Totals of Lines 1 through 5	0	0	0
	7. Less Reinvestments		0
	8. Net Purchases		0
Enter the Total from Line 8 in .....  Item 68			

# **SCHEDULE 8 — LOANS PAYABLE**

Source of Loans Payable at Any Time During the Reporting Period (A)	Loans Owed at Start of Period (B)	Loans Obtained During Period (C)	Repayment Made During Period		Loans Owed at End of Period (E)
			Cash (D)(1)	Other Than Cash (D)(2)	
1.					
2.					
3.					
4.					
5. Totals from additional pages (if any)	0	0	0	0	0
6. Totals of Lines 1 through 5	0	0	0	0	0
Enter the Totals from Line 6 in .....  Item 34 Column (C) .....  Item 50 .....  Item 70 .....  Item 75 with Explanation .....  Item 34 Column (D)					

# SCHEDULE 9 — ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

FILE NUMBER: 069-216

(A) Name <small>(List all persons who held office during the reporting period even if they received no salary or other disbursements. Use all capital letters.)</small>		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Title <small>(Enter title of officer, such as PRESIDENT or TREASURER.)</small>	Status (C)*					
1. Last Name: HARRIS First Name: MARY Title: PRESIDENT Status: C		53539	0	13034	1345	67918
2. Last Name: CONLEY First Name: SALLEY Title: SEC / TREAS Status: C		30558	4800	5983	0	41341
3. Last Name: BLOCKER First Name: TOMMIE Title: VICE PRES Status: C		16155	0	9377	0	25532
4. Last Name: KAUFMAN First Name: CYNTHIA Title: REC / TREAS Status: P		0	500	0	0	500
5. Last Name: DIXON First Name: GWEN Title: EXEC BOARD Status: C		1008	600	375	0	1983
6. Last Name: ROBINSON First Name: SHIRLEY Title: EXEC BOARD Status: C		0	550	125	0	675
7. Last Name: STEPTEAU First Name: CARRIE Title: EXEC BOARD Status: C		0	600	100	0	700
8. Totals from additional pages (if any)		0	1300	1987	0	3287
9. Totals of Lines 1 through 8		101260	8350	30981	1345	141936
				10. Less Deductions 34128		
Enter the Total from Line 11 in ..... Item 56 ➡				11. Net Disbursements 107808		

\*Code for Status (C): past officer — P; continuing officer — C; new officer during the reporting period — N.

(If any officer was not elected at a regular election in accordance with your organization's constitution and bylaws, explain in Item 75 on page 1.)

# SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES

FILE NUMBER: 069-216

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
1. Last Name: TYLER First Name: MARQUIT Position: CLERICAL Name of Affiliated Organization: N/A	24750	0	100	0	24850
2. Last Name: FIGUEROA First Name: LISA Position: SECRETARY Name of Affiliated Organization: N/A	16000	0	50	0	16050
3. Last Name: First Name: Position: Name of Affiliated Organization:	0	0	0	0	0
4. Last Name: First Name: Position: Name of Affiliated Organization:	0	0	0	0	0
5. Last Name: First Name: Position: Name of Affiliated Organization:	0	0	0	0	0
6. Totals from additional pages (if any)	0	0	0	0	0
7. Totals for all employees who, during the reporting period, received \$10,000 or less in total disbursements from your organization and any affiliates	3804	0	0	0	3804
8. Totals of Lines 1 through 7	44554	0	150	0	44704
Enter the Total from Line 10 in ..... Item 57 ⇒			9. Less Deductions 18982		
			10. Net Disbursements 25722		

# **SCHEDULE 11 — BENEFITS**

FILE NUMBER: 069-216

Description (A)	To Whom Paid (B)	Amount (C)
1. SEE ATTACHED SCHEDULE		
2.		
3.		
4.		
5. Total from additional pages (if any)		21948
6. Total of Lines 1 through 5		21948
Enter the Total from Line 6 ..... Item 63		


## **SCHEDULE 12 — CONTRIBUTIONS, GIFTS & GRANTS**

Description (A)	Amount (B)
1. SEE ATTACHED SCHEDULE	
2.	
3.	
4.	
5.	
6.	
7. Total from additional pages (if any)	2704
8. Total of Lines 1 through 7	2704
Enter the Total from Line 8 in ..... Item 64	


## **SCHEDULE 13 — OFFICE & ADMINISTRATIVE EXPENSE**

Description (A)	Amount (B)
1. SEE ATTACHED SCHEDULE	
2.	
3.	
4.	
5.	
6.	
7. Total from additional pages (if any)	130315
8. Total of Lines 1 through 7	130315
Enter the Total from Line 8 in ..... Item 60	

# **SCHEDULE 14 — OTHER RECEIPTS**

Description (A)	Amount (B)
1. SEE ATTACHED SCHEDULE	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16. Total from additional pages (if any)	8 1 1 7 1
17. Total of Lines 1 through 16	8 1 1 7 1
Enter the Total from Line 17 in .....  Item 54	

# **SCHEDULE 15 — OTHER DISBURSEMENTS**

Description (A)	Amount (B)
1. SEE ATTACHED SCHEDULE	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16. Total from additional pages (if any)	2 2 0 5 6
17. Total of Lines 1 through 16	2 2 0 5 6
Enter the Total from Line 17 in .....  Item 73	

ORGANIZATION NAME:  
SCHOOL CAFETERIA EMPLOYEES UNION L U 6 3 4

ENDING DATE OF PERIOD COVERED: 12-31-2000

FILE NUMBER: 0 6 9 - 2 1 6

PAGE \_\_\_\_ OF \_\_\_\_ ADDITIONAL PAGES

## SCHEDULE 9 — ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

(A) Name <small>(List all persons who held office during the reporting period even if they received no salary or other disbursements. Use all capital letters.)</small>		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Title <small>(Enter title of officer, such as PRESIDENT or TREASURER.)</small>	Status (C)					
Last Name TAYLOR First Name SELEDA Title EXEC BOARD Status C		0	5 5 0	1 0 0	0	6 5 0
Last Name ROSEN First Name MARGARE Title EXEC BOARD Status N		0	5 0	0	0	5 0
Last Name GARRETT First Name JOYCE Title TRUSTEE Status C		0	0	0	0	0
Last Name BAKER First Name ROBERT Title ADVISOR Status C		0	0	1 7 6 2	0	1 7 6 2
Last Name TOMARO First Name SUSAN Title TRUSTEE Status C		0	0	0	0	0
Last Name WASHINGTON First Name JIM Title EXEC BOARD Status C		0	7 0 0	1 2 5	0	8 2 5
Last Name  First Name  Title  Status						0
Last Name  First Name  Title  Status						0
Totals						

ORGANIZATION NAME:  
SCHOOL CAFETERIA EMPLOYEES UNION L U 6 3 4

ENDING DATE OF PERIOD COVERED: 12-31-2000

FILE NUMBER: 0 6 9 - 2 1 6

PAGE \_\_\_\_ OF \_\_\_\_ ADDITIONAL PAGES

## SCHEDULE 9 — ALL OFFICERS AND DISBURSEMENTS TO OFFICERS *(continued)*

(A) Name <small>(List all persons who held office during the reporting period even if they received no salary or other disbursements. Use all capital letters.)</small>		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Title <small>(Enter title of officer, such as PRESIDENT or TREASURER.)</small>	Status (C)					
Last Name _____ First Name _____ Title _____ Status _____		0	0	0	0	0
Last Name _____ First Name _____ Title _____ Status _____		0	0	0	0	0
Last Name _____ First Name _____ Title _____ Status _____		0	0	0	0	0
Last Name _____ First Name _____ Title _____ Status _____		0	0	0	0	0
Last Name _____ First Name _____ Title _____ Status _____		0	0	0	0	0
Last Name _____ First Name _____ Title _____ Status _____		0	0	0	0	0
Last Name _____ First Name _____ Title _____ Status _____		0	0	0	0	0
Totals						

Organization Name: SCHOOL CAFETERIA EMPLOYEES UNION LOCAL 634  
 Period End Date: DECEMBER 31, 2000

File Number: 069-216  
 Page \_\_\_\_ of \_\_\_\_

**SCHEDULE 1 -- LOANS RECEIVABLE**

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to business enterprises regardless of amount (A)	Loans Outstanding at Start of Period (B)	Loans Made During Period (C)	Repayments Received During Period		Loans Outstanding at End of Period (E)
			Cash (D)(1)	Other than Cash (D)(2)	
1. Name: TOMMIE BLOCKER Purpose: PURCHASE OF AUTOMOBILE Security: AUTOMOBILE Terms of Repayment: \$150.00 PER PAY PERIOD AT 7% PER ANNUM	0	3,852	0	0	3,852
2. Name: MARY HARRIS Purpose: CMAS BONUS, VACATION PAY, HOTEL EXPENSES Security: Terms of Repayment: NONE	1,019	4,418	1,536	0	3,901
3. Name: Purpose: Security: Terms of Repayment:	0	0	0	0	0
4. Name: Purpose: Security: Terms of Repayment:	0	0	0	0	0
5. Name: Purpose: Security: Terms of Repayment:	0	0	0	0	0
6. Name: Purpose: Security: Terms of Repayment:	0	0	0	0	0
7. Name: Purpose: Security: Terms of Repayment:	0	0	0	0	0
8. Name: Purpose: Security: Terms of Repayment:	0	0	0	0	0
9. Name: Purpose: Security: Terms of Repayment:	0	0	0	0	0
10. Name: Purpose: Security: Terms of Repayment:	0	0	0	0	0
<b>Total</b>	<b>1,019</b>	<b>8,270</b>	<b>1,536</b>	<b>0</b>	<b>7,753</b>



Period End Date: 12-31-2000

069-216

Page \_\_\_\_ of \_\_\_\_

**SCHEDULE 6 -- SALE OF INVESTMENTS AND FIXED ASSETS**

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
AUTOMOBILE	7,055	2,146	3,852	3,852
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
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	0	0	0	0
	0	0	0	0
Total other sales	7,055	2,146	3,852	3,852



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## SCHEDULE 11 - BENEFITS

[illegible]



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**SCHEDULE 12 CONTRIBUTIONS, GIFTS & GRANTS - Other**

Description (A)	Amount (B)
CHARITY DONATIONS	2,704
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
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	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
Total Contributions, gifts, & grants - other	2,704



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**SCHEDULE 13 -- OFFICE AND ADMINISTRATIVE EXPENSE - Other**

Description (A)	Amount (B)
RENT	22,887
TELEPHONE	11,163
EQUIPMENT RENTAL AND MAINTENANCE	6,388
PRINTING	5,987
POSTAGE	4,713
OFFICE EXPENSE	6,049
INSURANCE	3,207
CONFERENCES AND MEETINGS (NON-ALLOCABLE)	7,602
TRAINING	1,645
BANK CHARGES	266
REIMBURSEMENT OF SALARY AND BENEFITS	54,735
FLOWERS AND MEMORIALS AND GIFTS	3,493
ADP FEES	1,721
UTILITIES	459
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
Total Office & Administrative Expense - other	130,315



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**SCHEDULE 14 -- OTHER RECEIPTS - Other**

Description (A)	Amount (B)
REIMBURSEMENTS OF ADMIN EXPENSES BY:	0
LOCAL 634 HEALTH AND WELFARE FUND	28,357
LOCAL 634 LEGAL SERVICES FUND	29,779
GENERAL MEETING REIMBURSEMENT	2,465
VOIDED CHECKS	2,895
SHOP STEWARD REIMBURSEMENT	941
POSTAGE REIMBURSEMENT	512
TRUSTEE MEETING REIMBURSEMENT	83
CONFERENCE AND TRAVEL REIMBURSEMENT	2,575
RENT ESCROW REIMBURSEMENT	1,375
INSURANCE PROCEEDS	10,348
PRINTING REIMBURSEMENT	1,841
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
Total Other receipts - other	81,171



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**SCHEDULE 15 -- OTHER DISBURSEMENTS - Other**

Description (A)	Amount (B)
SHOP STEWARD REIMBURSEMENTS	2,200
UNION DUES REFUND	1,929
LABOR DAY PARADE EXPENSE	1,009
AUTOMOBILE EXPENSE	7,290
OTHER NON-TAX PAYROLL DEDUCTIONS	9,628
	0
	0
	0
	0
	0
	0
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	0
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	0
	0
	0
	0
	0
	0
	0
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	0
	0
	0
	0
	0
	0
	0
Total Other Disbursements - other	22,056



SCHOOL CAFETERIA EMPLOYEES LOCAL 634 UNION  
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DECEMBER 31, 2000

Item 75 - Additional Information:

**Schedule "A"**

Page 1, Item 11 - Create or participate in the administration of a trust or other organization

School Cafeteria Employees Local 634 Legal Trust  
520 North Delaware Ave.  
Suite No. 304  
Philadelphia, PA 19123  
Legal Service Benefits, E.I.N.: 23-66999959

School Cafeteria Employees Local 634 Health & Welfare Trust  
520 North Delaware Ave.  
Suite No. 304  
Philadelphia, PA 19123  
Welfare Benefits, E.I.N.: 23-2788903

**Schedule "B"**

Page 1, Item 13 - Acquire or dispose of any goods or property in any matter other than by purchase or sale

Depreciation expense for the year ended December 31, 2000 consisted of:

Office furniture and equipment	\$1,178
Automobile	<u>4,509</u>
	<u>\$5,687</u>

An automobile was sold to an officer during the year ended December 31, 2000 for \$3,852, with a cost of \$7,055, accumulated depreciation of \$4,909 and a book value of \$2,146. The officer is paying for the automobile through payroll withholdings.

**Schedule "C"**

Page 6, Schedule 13 - Reimbursement of salary and benefits

In order to fulfill their responsibility as full-time Union officials, certain officers take a leave of absence from their employer, the School District of Philadelphia. By agreement, the Local reimburses the District for all salaries and benefits paid by the District to such officers during their leave of absence. This amount reflects reimbursement of salary and benefits made during the year by the Local to the School District of Philadelphia.



SCHOOL CAFETERIA EMPLOYEES LOCAL 634 UNION  
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Item 75 - Additional Information (continued)

**Schedule "D"**

Page 5, Schedule 9 - Officers

The Local was released from Trusteeship effective June 15, 1999. All officers were elected to their listed positions with the exception of Cynthia Kaufman, who was appointed Recording-Secretary in accordance with the Local's Bylaws to fill a vacancy occurring after the elections.

**Schedule "E"**

Page 5, Schedule 9 - Column F -- Disbursements for Official Business

It is not practical to make a precise distribution of automobile expenses not paid to officers and included in column (f). However, a reasonable allocation of such expenses has been made. Union owned automobiles were used more than 50% on official union business. The remainder, if any, was for personal use.

**Schedule "F"**

Page 4, Schedule 5 -- Fixed Assets

Reconciliation of automobiles.

	<u>Cost</u>	<u>Accum. Dep.</u>	<u>Book Value</u>
At December 31, 1999	\$ 24,076	\$ 12,520	\$11,556
2000 Depreciation -- Schedule B	-	4,509	(4,509)
2000 Sale -- Schedule 6	<u>(7,055)</u>	<u>(4,909)</u>	<u>(2,146)</u>
At December 31, 2000	<u>\$ 17,021</u>	<u>\$ 12,120</u>	<u>\$ 4,901</u>



SCHOOL CAFETERIA EMPLOYEES LOCAL 634 UNION  
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DECEMBER 31, 2000

Item 75 - Additional Information (continued)

**Schedule "G"**

Statement A - Assets and Liabilities

Item 27 - Loans Receivable (Col A), Item 32 - Total Assets (Col. A), and Item 38  
- Net Assets (Col C)

The following items were increased to adjust Statement A to include a loan to an officer that should have been included on the December 31, 1999 filing.

	<u>Prior End</u> <u>Of Reporting Period</u>	<u>Adjustment</u>	<u>Restated Start</u> <u>of Reporting Period</u>
Item 27. Loans Receivable	\$ 0	\$ 1,019	\$ 1,019
Item 32. Total Assets	199,934	1,019	200,953
Item 38. Net Assets	170,386	1,019	171,405

